Case 16-02718 Doc 1	Filed 01/29/16	Entered 01/29/16 11:57:24	Desc Main
Fill in this information to identify your case:		age 1 of 68	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Jeannett First name	First name
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's license or passport	Grier Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or maiden names.	Middle name	wildale name
madernames.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>2624</u>	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

<u>Jeanne€ase 1</u>6-02718 Doc 1 Filed 01\$29/16 Entered @14/29/16 /14/16/7:24 Desc Main Debtor 1 Page 2 of 68 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names ✓ I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names 5. Where you live If Debtor 2 lives at a different address: Number Street Number Street City State Zip Code City State Zip Code County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. 14807 Artesian Number Street Number Street Harvey Illinois 60426 Zip Code City State City State Zip Code 6. Why you are Check one: Check one: choosing this district to file for Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Jeanne Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 (14-15)57:24 Desc Main Debtor 1

Document Document Page 3 of 68 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 12/2/2009 Case number MM / DD / YYYY District When Case number District _____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YYYY you, or by a Debtor Relationship to you business partner, or District When Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

No. Go to line 12.

this bankruptcy petition.

Jeanne**€ase 16-02718** Doc 1 Filed 01\$29/16 Entered 01/29/116 (14/14/157:24 Desc Main Debtor 1 Page 4 of 68 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (11/11/157:24 Desc Main

t Name Middle Name

Document F

Page 5 of 68

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

completion.

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

I have a mental illness or a mental deficiency that makes me incapable of

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Jeanne€ase 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 (14-14-57:24 Desc Main Debtor 1 Page 6 of 68 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Jeannett Grier Signature of Debtor 2 Signature of Debtor 1 1/29/2016 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (14.14.57:24 Desc Main Pirst Name Documents) Page 7 of 68

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

rrect.				
/s/ Peter O'Connor Signature of Attorney for Debtor			Date	1/29/2016 MM / DD / YYYY
Peter O'Connor				
Printed name				
Semrad Law Firm				
Firm name				
Number	Street			
City		State		Zip Code
Contact phone			E	Email address
Bar number				State

<u> Case 16-02718 Doc 1 Filed 01/29/16 Fntered 01/2</u>9/16 11:57:24 Desc Main Fill in this information to identify your case: Debtor 1 Jeannett Grier First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$16,278.71 1b. Copy line 62, Total personal property, from Schedule A/B \$16,278.71 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$14,319.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$15.418.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$29,737.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$9.228.83 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$5,102.00

Debtor 1	Jeanne€ase 16-02718	Doc 1	Filed 01629/16	Entered @1/29/166/1657:24	Desc Main					
	First Name	Middle Name	Document Programment	Page 9 of 68						
Part 4:										
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?										

6. /	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							
	✓ Yes.							
7. \	What kind of debt do you have?							
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.							
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Che this form to the court with your other schedules.	eck this box and submit						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Officer 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$5,987.33						
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedule E/F, copy the following:	Total claim						
	9a. Domestic support obligations (Copy line 6a.)	\$0.00						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00						
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy line 6f.)	\$0.00						
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00						
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00						

\$0.00

9g. Total. Add lines 9a through 9f.

Fill in this	information to identify your cas		Flien ()1/2	9/16 Entered ())	129/16	11:57:24 Desc	c Main
Debtor 1	Jeannett			Grier	_		
Dalue	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse,	if filing) First Name	Middle	Name	Last Name			
United St	tates Bankruptcy Court for the:	Northern	Dis	trict of Illinois	-		
Case nun				(State)	-		
							Check if this is an
	al Form 106A/B						amended filing
Sche	dule A/B: Prope	erty					12/
category v esponsik vrite your	ategory, separately list and de where you think it fits best. B ole for supplying correct info r name and case number (if kn Describe Each Resider	e as complete and rmation. If more s nown). Answer eve	l accurate as po pace is needed ery question.	ossible. If two married peo , attach a separate sheet t	ple are filin to this form	ng together, both are equ n. On the top of any addi	ıally
1. Do yo	u own or have any legal or eq	uitable interest in	any residence,	building, land, or similar p	property?		
V	No. Go to Part 2						
1.1	Yes. Where is the property? Street address, if available, or	other description	Single-fam	oroperty? Check all that app nily home multi-unit building	bly.	•	aims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
			Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other			Current value of the entire property?	Current value of the portion you own?
	Number Street City State	Zip Code				Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
			Debtor 1 o	•		Check if this is cor	mmunity property
				ation you wish to add abo	ut this iten	n, such as local	
lf vou	own or have more than one, list	here:	property ider	ntification number:			
1.2	Street address, if available, or		Single-fam	oroperty? Check all that app nily home multi-unit building ium or cooperative	oly.	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the	•
				red or mobile home		entire property?	portion you own?
	Number Street		Timeshare	Land Investment property Timeshare		Describe the nature of your ownership interest (such as fee simple, tenancy by	
	City State	Zip Code	Other Who has an i	interest in the property?	Check one.	Check if this is cor	
			Debtor 1 o	•		(see instructions)	dinty property
			Debtor 2 o	•			
			=	and Debtor 2 only			
			_	e of the debtors and another			
				ation you wish to add abo ntification number:	ut this iten	n, such as local	

Debtor 1	Jeanne Case 16-027		Filed 01\$29/16 Entered 01\$29#16	(ilkali w 57: <u>24 De</u>	sc Main
1.3Stre	eet address, if available, or oth		Docume Page 11 of 68 /hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu	claims or exemptions. Put used claims on Schedule D: claims Secured by Property. Current value of the
Nur	nber Street		Manufactured or mobile home Land	entire property? Describe the nature of	portion you own?
City	y State	Zip Code	Investment property Timeshare Other	interest (such as fee the entireties, or a life	simple, tenancy by
			The has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, s	(see instructions	ommunity property s)
0 4 -1 -1	the deller relies of the manual	рі	roperty identification number: of your entries from Part 1, including any entries for		
			or your entities from Fart 1, including any entities to		
Part 2:	Describe Your Vehicle	es			
Do you o vyou own th	wn, lease, or have legal or e nat someone else drives. If you ans, trucks, tractors, sport utili	equitable interest in a lease a vehicle, also	any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexpes		
✓ Ye					
3.1	Make Model: Year:	Honda Civic 2008	Who has an interest in the property? Check one. Debtor 1 only	the amount of any secu	claims or exemptions. Put ared claims on Schedule D: Claims Secured by Property.
	Approximate mileage: Other information:	82000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$4975.00	Current value of the portion you own? \$4975.00
			Check if this is community property (see instructions)		
3.2	Make Model: Year:		Who has an interest in the property? Check one. Debtor 1 only	the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> Claims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
			Check if this is community property (see instructions)		

Debtor 1	Jeanne€ase 16-02718 Doc 1	Filed 01629/16 Entered 01/29/16	6∂∂446457: <u>24 Des</u>	c Main	
	First Name Middle Name	Document Page 12 of 68			
3.3	Make	Who has an interest in the property? Check	Do not deduct secured cl	•	
	Model: Year:	one. Debtor 1 only	the amount of any secure	ims Secured by Property.	
	Approximate mileage:	= '	Orcators vino riave ora	iins occured by 1 roperty.	
	··· ———	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	•	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
	Yes				
4.1	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secured claims on Schedule D:		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the portion you own?	
	Other information:	Debtor 1 and Debtor 2 only	entire property?		
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
		II of your entries from Part 2, including any entries f	1 043	975.00	
,		-	······································		

Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name Filed 01629/16 Entered 01/29/16 11.657:24 Desc Main Document Page 13 of 68

Do you own or h	ave any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household good		
Examples: Major ap	pliances, furniture, linens, china, kitchenware	
No		
Yes. Describe	Used Furniture	\$600.00
•	ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games	
✓ No		
Yes. Describe		
stamp, c	Alue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; oin, or baseball card collections; other collections, memorabilia, collectibles	
No Yes. Describe		
	ports and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes liks; carpentry tools; musical instruments	
✓ No		
Yes. Describe		
10. Firearms Examples: Pistols, r ✓ No Yes. Describe	fles, shotguns, ammunition, and related equipment	
11. Clothes Examples: Everyday	v clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	Used Clothing	\$500.00
gold, silv	jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer	
✓ No Yes. Describe		
13. Non-farm anima Examples: Dogs, ca		
✓ No		
Yes. Describe		
14. Any other perso	nal and household items you did not already list, including any health aids you did not list	
✓ No		
Yes. Describe		
15. Add the dollar v	alue of all of your entries from Part 3, including any entries for pages you have attached	\$1100.00
	t number here	\$1100.00

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01 (29/16 Entered 01/29/16 (1/29/16) 57:24 Desc Main

Middle Name Docume Name Page 14 of 68

Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Chase \$1200.00 17.2. Checking account: 17.3. Savings account: Chase \$3.71 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Filed 01629/16 Entered 01/29/16 Auto 57:24 Desc Main Doc 1 Document Page 15 of 68 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	Jeanne First Name	ase 1	6-02718	Doc 1		01 <u>¢2</u> 9/16 cumente			6/14/12/157: <u>24</u>	Desc Main
24.				ition IRA, in a), 529A(b), and		n a qualifie	d ABLE progra	m, or under a	qualified sta	te tuition program.	
		No Yes	Institution	on name and d	escription. S	eparately file	the records of a	ny interests.11	U.S.C. § 521((c):	
25.	Tru	sts, equita	able or 1	uture interes	ts in proper	ty (other th	an anything lis	ted in line 1), a	and rights or	powers	
	exe	rcisable fo	or your l	penefit					-		
		Yes. Desc	ribe								
26.							intellectual proyalties and licens		S		
		No Yes. Desc	cribe								
27.				, and other ge mits, exclusive			ssociation holdin	gs, liquor licens	ses, professio	nal licenses	
		No Yes. Desc	rihe								
Mor	nev (ved to you	7						Current value of the
	.cy ·	о. р. орс	,,,, o.	iou to you	•						portion you own? Do not deduct secured claims or exemptions.
28.		refunds ov	wed to y	ou .							
		No Yes. Give s				Tax Return				Federal:	\$2000.00
		you a	Iready fi	ncluding whether led the returns ears	er					State:	
29.		ily suppor	t		inv spousals	upport child	support mainte	nance divorce	settlement pro	Local:	
	✓							,	, ,		
		Yes. Give s	specific i	nformation						Alimony:	
										Maintenance: Support:	
										Divorce settlement	:
										Property settlemen	t.
		<i>nples:</i> Unpa	aid wage	one owes you es, disability ins ity benefits; un	urance paym		lity benefits, sick omeone else	pay, vacation pa	ay, workers' co	mpensation,	
		No Yes. Descr	ihe								
	ш	ies. Desci									

Debt	tor 1	Jeanne Case 16 First Name	6-02718	Doc 1 Middle Name	Filed 01629/16 Document	Entered @1/29/i Page 17 of 68	L6 @Li√157: <u>24</u> D	esc Main
31.		rests in insurance mples: Health, disabi		rance; health		edit, homeowner's, or rente	r's insurance	
		No Yes. Name the insur of each policy and lis	, ,		Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		meone who has died beeds from a life insurance p	policy, or are currently entitle	d to receive	
33.	Exar				have filed a lawsuit or more claims, or rights to sue	ade a demand for payme	nt	
34.	Othe to se		unliquidated (claims of ev	very nature, including co	unterclaims of the debtor	and rights	
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list				
36.			-			es for pages you have att		\$3203.71
Part	5:	Describe Any B	susiness-Re	elated Pro	perty You Own or Ha	ave an Interest In. Li:	st any real estate ii	n Part 1.
37.	Do y	ou own or have an	y legal or equ	uitable intere	est in any business-relate	d property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or No Yes. Describe	commissions	s you alread	y earned			_
39.		ce equipment, furn mples: Business-rela			odems, printers, copiers, fa	x machines, rugs, telephone	es, desks, chairs, electron	ic devices
		No Yes. Describe						

		Jeanne Case 16 First Name		Doc 1	Filed 01629/16 Document	Page 18 of 68	166.∉1840±157: <u>24</u> D	esc Main	_
40.	Mac	hinery, fixtures, eq	uipment, sup	plies you us	se in business, and tools	of your trade			
	✓	No							
		Yes. Describe							_
41.	Inve	entory							
	✓	No							
		Yes. Describe						l -	_
42.	Inte	rests in partnershi	ps or joint ve	entures				1	
	✓	No							
		Yes. Give specific			Name of entity:		% of ownership:		
		information about							_
		them							
43 (Susta	omer lists, mailing	lists or other	compilatio	ns			_	
		_		••••••••••••••••••••••••••••••••••••••					
			dude nersonal	lv identifiahle	information (as defined in	11 I I S C			
	ш		sidde personal	iy ideritiliable	inionnation (as actifica in	11 0.0.0. § 101(4174)):			
		☐ No							
		Yes. Descri	ibe						
44.	Any	business-related p	roperty you	lid not alrea	dy list				
	~	No							
	=	Yes. Give specific							
		information							
									_
									•
			-			for pages you have attacl			
Part	6:	Describe Any F If you own or have an	arm- and (Commerci nland, list it in	al Fishing-Related F	Property You Own or I	Have an Interest In		
46.	Do	you own or have a	ny legal or eq	uitable inter	rest in any farm- or comn	nercial fishing-related prop	erty?		
	7	No. Go to Part 7.						Current value of the	
	Ħ	Yes. Go to line 47.						portion you own? Do not deduct secured	
								claims	
4-	_							or exemptions	
47.		m animals <i>mples:</i> Livestock, pou	ultrv. farm-raise	ed fish					
			,,						
	뇓	No You Describe						1	
	Ш	Yes. Describe							_

Deb	tor 1	Jeanne Case 16 First Name	6-02718	Doc 1 Middle Name	Filed 01629/16 Document	Entered 01/29/116/11/157:24 Page 19 of 68	Desc	Main
48.	Cro	ps-either growing	or harvested					
	✓	No						
		Yes. Describe						
49.	Fari	m and fishing equi	oment, imple	ments, machi	nery, fixtures, and too	s of trade		
	✓	No						
		Yes. Describe						
50.	Farı	ا m and fishing supp	lies, chemica	als, and feed				
	✓	No						
		Yes. Describe						
51.		farm- and commen mples: Livestock, pou			ty you did not already	ist		
	✓	No						
		Yes. Describe					_	
FO A	_1_1 41_	المركب وبالمدينة المادرة		: f Dt	C :	- fan nama van have etterhad		
			-			s for pages you have attached		
							<u> </u>	
Part						hat You Did Not List Above		
53.		ou have other prop mples: Season tickets			ot already list?			
		No						
		Yes. Give specific						
	_	information						
E4 A.	dd 4h	o dollar valua of all	of vour optri	ica from Bart	7 Write that number b	200		
34. A	aa tn	le dollar value of all	or your entri	ies from Part	7. write that number no	ere		
Part	8:	List the Totals	of Each Pa	rt of this F	orm			
		total vehicles, line		P 45	\$4975.0	0		
		: Total personal and		items, line 15	<u>\$1100.0</u>	0		
		: Total financial ass			\$3203.7	1		
59. F	Part 5	i: Total business-re	lated proper	ty, line 45				
60. F	Part 6	: Total farm- and fi	shing-related	d property, lin	e 52 			
61. F	Part 7	: Total other prope	rty not listed	, line 54				
62. 1	Total	personal property.	Add lines 56 tl	hrough 61	\$9278.7	1		+ \$9278.71
						Copy personal property	total ►	
								\$9278.71
63. T	otal c	of all property on S	chedule A/B.	Add line 55 + I	ine 62			

			oc 1 Filed 01/	/29/16 Entered	101/29/16 11:57:24	Desc Main
Fill	in this informa	ation to identify your case:		J		
Del	otor 1	Jeannett First Name	Middle Name	Grier Last Name		
	otor 2		Middle Name	Last Name		
(Sp	ouse, if filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the: Northe	ern [District of Illinois		
	se number			(State)		
Of	ficial F	orm 106C				Check if this is a amended filing
Sc	hedule	C: The Propert	y You Claim	as Exempt		12/1
the For is to exe rece exe pro	each item o state a s mpted up eive certa mption of perty is de t1: Identi Which set You an	additional pages, write you of property you claim a pecific dollar amount as to the amount of any apin benefits, and tax-exen 100% of fair market value.	ur name and case notes exempt, you mu exempt. Alternative plicable statutory npt retirement function and the amount, your exempt as Exempt ag? Check one only, even ankruptcy exemptions. 11 U.S.C. § 522(b)(2)	st specify the amovely, you may claim limit. Some exempteds—may be unlimit limits the exemption would be I	unt of the exemption you the full fair market valuations—such as those for ted in dollar amount. Ho ion to a particular dollar imited to the applicable with you.	or health aids, rights to wever, if you claim an amount and the value of the
		ription of the property and line le A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemp		cific laws that allow exemption
	Brief			_		735 ILCS 5/12-1001(b)
	description:	Chase	\$1,200.00		\$1,200.00	
	Line from Schedule A	/B: <u>17</u>		100% of fair marke applicable statutor		
	Brief		•		<u></u>	735 ILCS 5/12-1001(b)
	description: Line from	Chase	\$3.71		\$3.71	
	Schedule A	/B: <u>17</u>		100% of fair marke applicable statutor		
3.	(Subject to a No Yes. D	aiming a homestead exemption adjustment on 4/01/16 and every id you acquire the property covere o	3 years after that for case	es filed on or after the date	•	

<u>Filed 01¢29/16 Entered 01/29/16 1៤៤/57:24 Desc Main</u> Document Page 21 of 68 Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name

•	ion of the property and ule A/B that lists this	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
		Copy the value from Schedule A/B		
Brief description:	Used Clothing	\$500.00	\$500.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
Brief		#0.000.00		735 ILCS 5/12-1001(b)
description:	2015 Tax Return	\$2,000.00	\$2,000.00	
Line from Schedule A/B:	28		100% of fair market value, up to any applicable statutory limit	
Brief description:	Earned Income Credit 2015	\$4,000.00	\$4,000.00	735 ILCS 5/12-1001(g)(1)
Line from Schedule A/B:	28		100% of fair market value, up to any applicable statutory limit	<u> </u>
Brief	Obited Tays Consults 2045	\$3,000.00		735 ILCS 5/12-1001(g)(1)
description:	Child Tax Credit 2015	ψο,σου.σο	\$3,000.00	
Line from Schedule A/B:	28		100% of fair market value, up to any applicable statutory limit	

	Case 16-02718	Doc 1	Filed 01/29/16	Entered 01/29	/16 11:57:24	Desc Main	
Fill in this infor	mation to identify your case:			- J			
Debtor 1	Jeannett		Grier				
	First Name	Middle N		ame			
Debtor 2							
(Spouse, if filin	¹⁹⁾ First Name	Middle N	ame Last N	ame			
United States I	Bankruptcy Court for the: No	orthern	District of IIII	inois State)			
Case number (If known)			(3	biate)			
<u> </u>	5 400 5					□Ch	eck if this is a
Official	Form 106D						ended filing
Schedu	ule D: Creditor	s Who	Have Clain	ns Secured	l by Prope	rty	12/1
	lete and accurate as po						supplying
-	rmation. If more space				-		
	e top of any additional	-		• .			
1. Do any c	reditors have claims secured	by your prope	rtv?				
	Check this box and submit this fo		•	s. You have nothing else	to report on this form.		
=	Fill in all of the information below		,	· · · · · · · · · · · · · · · · · ·			
	All Secured Claims						
	ecured claims. If a creditor has note than one creditor has a part					Column B	Column C
	list the claims in alphabetical or			art 2. As maon as	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	•			value of collateral.	claim	If any
2.1 Exeter Fin	nance Corp				\$13,520.00	\$4,975.00	\$8,545.00
Creditor's		Describe the	property that secures	the claim:			
P.O. Box Numbe		Honda, Civic	Value: \$4,975.00		1		
Numbe	Sileet	As of the date	e you file, the claim is:	Check all that apply.	-		
		Continger	nt				
Irving Citv	Texas 75016 State ZIP Code	Unliquida	ted				
	es the debt? Check one.	Disputed					
✓ Debto	or 1 only	Nature of lie	n. Check all that apply.				
	or 2 only	An agree	ment you made (such as	mortgage or secured			
Debto	or 1 and Debtor 2 only	car loan)	,	3.3.			
	ast one of the debtors and	Statutory	lien (such as tax lien, me	echanic's lien)			
anoth		Judgmen	t lien from a lawsuit				
	ck if this claim relates to a munity debt	Other (inc	cluding a right to offset) _				
	t was incurred 5/1/2015	Last 4 digits	of account number	1001	<u>-</u>		
2.2 Progressi	ve Finance				\$799.00	\$600.00	\$199.00
Creditor's		Describe the	property that secures	the claim:	Ψ133.00	Ψ000.00	Ψ100.00
P.O. Box		Used Furnitu	re Value: \$600.00]		
Numbe	er Street		e you file, the claim is:	Check all that apply.	1		
		Continger	nt				
Tempe	Arizona 85285	Unliquida	ted				
City Who owe	State ZIP Code es the debt? Check one.	Disputed					
	or 1 only	Nature of lie	n. Check all that apply.				
	or 2 only	An agree	ment you made (such as	mortgage or secured			
	or 1 and Debtor 2 only	car loan)	Tient you made (Such as	mortgage or secured			
	ast one of the debtors and	Statutory	lien (such as tax lien, me	echanic's lien)			
anoth			t lien from a lawsuit	,			
	k if this claim relates to a	= -	cluding a right to offset)				
	munity debt t was incurred	_	of account number				
Date deb					- 	1	
	Add the dollar value of you	r entries in Co	lumn A on this page	Write that number	\$14.319.00	1	

here:

		Case 16-02718	R Doc 1 Filed	01/29/16	Entered 01	/29/16 11:57:24	Desc	Main	
Fill in	this informa	ation to identify your case		····					
Debto		<u>Jeannett</u>		Grier					
Dobte		First Name	Middle Name	Last N	lame				
Debto (Spou		First Name	Middle Name	Last N	lame				
Unite	d States Ba	nkruptcy Court for the:	Northern	District of III					
Case (If kno	number			(5	State)				
•		orm 106E/F				_	Che	ck if this is an	amended filing
			ditors Who	Have U	nsecure	d Claims			12/15
106Å/E are list the bo	B) and on Sted in Sche exes on the	Schedule G: Executory edule D: Creditors Who eleft. Attach the Contin	xpired leases that could r Contracts and Unexpired of Hold Claims Secured by uation Page to this page Y Unsecured Claims	d Leases (Officially Property. If mo On the top of a	al Form 106G). Do i ore space is neede	not include any credito d, copy the Part you ne	rs with parti ed, fill it ou	ally secured t, number th	d claims that e entries in
			secured claims against yo						
	_ ′	to Part 2.	,						
j	Yes.								
-	identify wha possible, list Part 1. If mo	t type of claim it is. If a cla t the claims in alphabetica ore than one creditor hold	claims. If a creditor has mo im has both priority and nor al order according to the cre is a particular claim, list the laim, see the instructions for	npriority amounts editor's name. If y other creditors ir	, list that claim here a rou have more than t n Part 3.	and show both priority and	nonpriority a	amounts. As r	much as
							Total claim	Priority	Nonpriority
								amount	amount

Doc 1 Filed 01629/16 Entered 01/29/16 16-157:24 Desc Main Debtor 1 Documernt Page 24 of 68 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 ALCOA Billing Center \$336.00 Last 4 digits of account number Nonpriority Creditor's Name 342<u>9 Regal Dr</u> When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Alcoa Tennessee 37701 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 ALCOA Billing Center \$336.00 Last 4 digits of account number Nonpriority Creditor's Name 3429 Regal Dr When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Tennessee 37701 Alcoa Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 ANN ARBOR CB \$595.00 6847 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 7820 311 N. MAIN ST When was the debt incurred? 9/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent ANN ARBOR Michigan 48107 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans

✓ No Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim relates to a community debt

Other. Specify

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

Filed 01629/16 Entered 01/29/16 11/257:24 Desc Main Documenter Page 25 of 68 Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name

Part 2: Your NONPRIORITY U	Jnsecured Claims -	Continuation	Page
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	After listing any entries on this page, number them beginning	y with 4.5, followed by 4.6, and so forth.	Total claim
4.4	ARS Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 Number Street FORT Florida 33313 LAUDERDAL City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?	with 4.5, followed by 4.6, and so forth. Last 4 digits of account number 3310 When was the debt incurred? 6/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$823.00
4.5	Yes CMRE. 877-572-7555 Nonpriority Creditor's Name 3075 E IMPERIAL HWY STE Number Street BREA California 92821 City State Zip Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	Last 4 digits of account number	\$722.00
4.6	Is the claim subject to offset? No Yes CMRE. 877-572-7555	Other. Specify	\$82.00
	Nonpriority Creditor's Name 3075 E IMPERIAL HWY STE Number Street BREA California 92821 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 2026 When was the debt incurred? 8/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	QUE.TU

Filed 01@9/16 Entered 01/29/16 ଲିଏ-57:24 Desc Main Documente Page 26 of 68 Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.7	COMENITYCAPITAL/PRDSGN	Last 4 digits of account number	\$1,025.00
	Nonpriority Creditor's Name PO Box 659622	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	San Antonio Texas 78265 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	Yes		
4.0	CONVERGENT OUTSOURCING		Фого оо
4.8	Nonpriority Creditor's Name	Last 4 digits of account number 4359	\$359.00
	800 SW 39TH ST Number Street	When was the debt incurred? 7/1/2012	
	Trained.	As of the date you file, the claim is: Check all that apply.	
	RENTON Washington 98057	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No	_	
	Yes		
4.9	CONVERGENT OUTSOURCING	Last 4 digits of account number 9040	\$191.00
	Nonpriority Creditor's Name 800 SW 39TH ST	When was the debt incurred? 6/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	RENTON Washington 98057	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No		
	Yes		

<u>Jeanne€ase 16-02718</u> Doc 1 Filed 01629/16 Entered 01/29/16 /14-1-57:24 Desc Main Debtor 1

Document Page 27 of 68

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 Credit Box \$3,500.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 168 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60016 Des Plaines Unliquidated State City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No ☐ Yes 4.11 CREDITORS DISCOUNT & A \$992.00 Last 4 digits of account number 6669 Nonpriority Creditor's Name 415 E MAÍN ST When was the debt incurred? 4/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **STREATOR** 61364 Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? lacksquareOther, Specify **✓** No Yes 4.12 CUSTOM COLL SRVS INC \$234.00 Last 4 digits of account number Nonpriority Creditor's Name 55 EAST 86TH AVE STE D When was the debt incurred? 6/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **MERRILLVILLE** Indiana 46411 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Is the claim subject to offset?

Other. Specify

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (14-14-57:24 Desc Main First Name Middle Name Document Page 28 of 68

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
A.13 CUSTOM COLL SRVS INC Nonpriority Creditor's Name 55 EAST 86TH AVE STE D Number Street MERRILLVILLE Indiana 46411 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	Last 4 digits of account number8652	\$210.00
### A.14 ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 6926 When was the debt incurred? 7/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$151.00
HCFS Healthcare Financial Services, LLC	Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$660.00

Jeanne€ase 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 /141/57:24 Desc Main Debtor 1

Document Page 29 of 68 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 HRRG \$636.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 459080 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Fort Lauderdale Florida 33345 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only \square Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 Majestic Lake Financial Inc \$3,320.00 Last 4 digits of account number Nonpriority Creditor's Name 635 East Highway 20 # K When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Upper Lake California 95485 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that 4.18

At least one of the debtors and another	you did not report as priority claims			
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?	Other. Specify			
✓ No				
Yes				
Midland Credit Management	Last 4 digits of account number \$246.00			
Nonpriority Creditor's Name 2365 Northside Dr # 300	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
San Diego California 92108 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
✓ No Yes				

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 Act 57:24 Desc Main
First Name Documer Page 30 of 68

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.19	MIDLAND FUNDING		\$246.00
	Nonpriority Creditor's Name		ΨΣ-10.00
	8875 AERO DR STE 200 Number Street	When was the debt incurred? 3/1/2014	
	Trained Street	As of the date you file, the claim is: Check all that apply.	
	0.4NLDIF00 0.4Km/r 00400	Contingent	
	SAN DIEGO California 92123 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		
4.20	MONROE AND MAIN	Last 4 digits of account number	\$196.00
	Nonpriority Creditor's Name 1112 7TH AVE		
	Number Street		
			\$246.00 divorce that milar debts \$196.00 divorce that milar debts \$305.00
	MONROE Wisconsin 53566	Last 4 digits of account number	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Last 4 digits of account number	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another		
	片		
	Check if this claim relates to a community debt		
	Is the claim subject to offset?	Other. Specify	
	Yes		
4.21	MONTGOMERYWD Nonpriority Creditor's Name	Last 4 digits of account number1571	\$305.00
	1112 7th Ave.	When was the debt incurred? 8/1/2013	
	Number Street	As of the date you file the claim is: Check all that apply	
	Monroe Wisconsin 53566		
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only		
	Debtor 2 only	<u>···</u>	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt		
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (16/16/16)57:24 Desc Main First Name Document Page 31 of 68

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
	NW IND Radiology Services	Last 4 digits of account number	\$36.00
	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	55 E 86th Ave STE A Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
	Merrillville Indiana 64611	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	<u>✓</u> No		
	Yes		
4.23	Planet Fitness	Last 4 digits of account number	\$36.00
	Nonpriority Creditor's Name 240 E Illinois	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60611	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. ✓ Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		
4.24	Seas & Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$181.00
	P.O. Box 15174	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Little Rock Arkansas 72231	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. ✓ Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
		you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No ✓ Yes		

Part 4: Add the Amounts for Each Type of Unsecured Claim

	_				
		nts of certain types of unsecured claims. This information is fo is for each type of unsecured claim.	r sta	ntistical reporting purposes	only. 2
				Total claims	
Total claims	6a.	Domestic support obligations.	6a.	\$0.00	
from Part 1	6b.	Taxes and certain other debts you owe the	6b.	\$0.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00	
				Total claims	
Total claims from Part 2	6f.	Student loans	6f.	\$0.00	
mom r dit 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$15,418.00	
	6i	Total. Add lines 6f through 6i.	6i.	\$15.418.00	

	Case 16-0271		01/29/16	Entered 01	<i>1</i> 29/16 11:57:24	Desc Main
Fill in this inform	ation to identify your case	9:		J		
Debtor 1	Jeannett		Grier			
	First Name	Middle Name	Last N	ame		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last N	ame		
United States Ba	ankruptcy Court for the:	Northern	District of Illi	nois		
			(S	tate)		
Case number (If known)						
Official I	orm 106G					Check if this is ar amended filing
Schedul	e G: Execut	ory Contracts	and Un	expired L	_eases	12/1
•	l, copy the additional p			•		ing correct information. If more onal pages, write your name and
1. Do you ha	ave any executory	contracts or unexpire	d leases?			
✓ No. Che	ck this box and file this for	m with the court with your oth	ner schedules. Yo	ou have nothing els	e to report on this form.	
Yes. Fill i	in all of the information be	elow even if the contracts or le	eases are listed	on Schedule A/B: F	Property (Official Form 106A	√B).
 List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. 						
Person	or company with whor	n you have the contract or	lease		State what the contrac	t or lease is for

		Case 16-0271	8 Doc 1 Filed 0	1/29/16 Entered (01/20/16 11·57·2 <i>/</i>	Desc Main
Fill ir	this informa	ation to identify your case			3/10 11.57.24	DC3C Main
Debt	or 1	Jeannett		Grier		
Dala	0	First Name	Middle Name	Last Name		
Debt (Spo		First Name	Middle Name	Last Name	_	
Unite	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois		
Case (If kn	e number own)			(State)	_	
•						Check if this is a amended filing
Off	icial F	orm 106H				anchided liling
		e H: Your Co	odebtors			12/1
	-	•		-	-	If two married people are filing
n the	•			•		e, fill it out, and number the entries ase number (if known). Answer
		e any codebtors? (If yo	ou are filing a joint case, do not	list either spouse as a codebto	or.)	
	✓ No Yes					
				• • •	unity property states and territor	ies include Arizona, California, Idaho,
	_ ′	evada, New Mexico, Pue o to line 3.	erto Rico, Texas, Washington, a	and vvisconsin.)		
į	Yes. Di	id your spouse, former sp	oouse, or legal equivalent live v	vith you at the time?		
	N N					
	Y6	es. In which community s	tate or territory did you live?	Fill	in the name and current addres	ss of that person.
		Name of your spouse, for	ormer spouse, or legal equivale	ent	-	
		Number Street			-	
		City	State	Zip Code	-	
á	as a codebt	or only if that person i	s a guarantor or cosigner. N	lake sure you have listed the		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
(Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Debtor 1 Jeannett Grier First Name Middle Name Last Name Check if this is: Check if	Debtor 1 Jeannett Grier First Name Middle Name Last Name United States Bankruptcy Court for the: Morthern District of Illinois Case number (If thrown) District of Illinois (State) An amended filing An amended filing An amended filing District of Illinois (State) An amended filing An amended filing District of Illinois (State) An amended filing An amended filing District of Illinois (State) District of Illinois (State) District of Illinois (State) District of Illinois (State) An amended filing District of Illinois (State) An amended filing An amended filinois MM / DD / YYYY District filinois (State) District of Illinois (Poblor 1 and Debtor 2), both are equally expresses as of the following date: District of Illinois (Poblor 1 and Debtor 2), both are equally expresses as of the following date: District of Illinois (Poblor 1 and Debtor 2), both are equally expresses as of the following date: District of Illinois (Poblor 1 and Debtor 2), both are equally expresses as of the following date: District of Illinois (Poblor 1 and Debtor 2), both are equally expresses as of the following date: District of Illinois (P	Fill in this	information to identify	y your case:	1/00/10		1/29/16 11	:57:24	Desc Mair	1
Pist Name Middle Name Last Name Check if this is: Check if this is: An amended filing A supplement showing post-petition chapt expenses as of the following date: MM / DD / YYYY	Pirst Name		,		писти г	ige oo o i	00			
Debtor 2 Spouse, if filing) First Name Middle Name Last Name Middle Name Last Name District of Illinois (State) District	Check if this is:	Debtor 1					_			
Case number	Case number		First Name	Middle Name	Last Name	€		Check if this is	3:	
United States Bankruptcy Court for the: Northern	United States Bankruptcy Court for the: Northern		ing) First Name	Middle Name	l ast Name		-	An amend	ed filing	
District of Illinois Expenses as of the following date: Cistate Cist	Case number (If known) Difficial Form 106 Schedule I: Your Income Let as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you neclude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill In your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Describe Employed there? Debtor 1 Debtor 2 Employed Debtor 2 Employed Not Employed Not Employed Not Employed Not Employed Number Street Number Street Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code City State			Wildale Name				A supplem	nent showing po	st-petition chapter
Case number (If known) Difficial Form 106 Schedule I: Your Income Is as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equall esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you relocuted information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Imployer's address Tol Lee St STE 500 Number Street Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code	Difficial Form 106 Schedule I: Your Income The as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally asponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you relude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (If known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Debtor 1 Debtor 2 Employed Not Employed Not Employed Not Employed Not Employed Not Employed Sunrise Transportation Holdings Find the special page with special page with information about additional employer's address or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? How long employed there?	United States	s Bankruptcy Court for the:	Northern			_			
Le as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equall esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you could information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Tot Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code City State Zip Code	Schedule I: Your Income is as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Tot Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code		r		(State	*) 	-	MM / DD /	YYYYY	
Le as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equall esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you not clude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Describe Employer's address Tot Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code City State Zip Code	Schedule I: Your Income te as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equall' esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. Employment status Debtor 1 Debtor 2 Employed Not Employed Not Employed Not Employed Include part time, seasonal, or self-employed work. Occupation Employer's name Include part time, seasonal, or self-employed work. Occupation imployer's address Tot Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code	Official	Form 106l							
esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you neclude information about your spouse. If you are separated and your spouse is not filling with you, do not include nade information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Describe Employment Debtor 1 Debtor 2 Employed Not Empl	esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you notude information about your spouse. If you are separated and your spouse is not filling with you, do not include finformation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment Include part time, seasonal, or self-employed work. Occupation Employer's address Include part time, seasonal, or self-employed work. Occupation Employer's address Tot Lee St STE 500 Number Street Describe Employed Victory Center of River Oaks Sunrise Transportation Holdings Remployer's address Number Street How long employed there?		_	ome						12
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employent status ✓ Employed ✓ Employed ✓ Not Employed ✓ Sunrise Transportation Holdings Sunrise Transportation Holdings 8500 S Vinienneces Number Street Des Plaines Illinois 60016 City State Zip Code City State Zip Code	If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status Employed Not Employed		•	,	Answer every	question.				
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status Employed Not Employed Not Employed	If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status Not Employed Not Employ				Debtor 1			Debtor 2		
Ir you have more than one job, attach a separate page with information about additional employers. Cocupation Cocupation	ir you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address To1 Lee St STE 500 Number Street Number Street Des Plaines Illinois 60016 City State Zip Code How long employed there? Not Employed Cunrise Transportation Holdings Besources Number Street Des Plaines Illinois 60016 City State Zip Code City State Zip Code			Employment status	✓ Employed			✓ Employed	d	
attach a separate page with information about additional employers. Coccupation Employer's name Victory Center of River Oaks Sunrise Transportation Holdings	attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code How long employed there? Cictory Center of River Oaks Sunrise Transportation Holdings 8500 S Vinienneces Number Street Des Plaines Illinois 60016 City State Zip Code How long employed there?		•		= ' '	ved				
employers. Employer's name Victory Center of River Oaks Sunrise Transportation Holdings 8500 S Vinienneces Number Street Post Plaines Illinois 60016 City State Zip Code Sunrise Transportation Holdings 8500 S Vinienneces Number Street Chicago Illinois 60620 City State Zip Code	employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Tot Lee St STE 500 Number Street Total Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code How long employed there? Sunrise Transportation Holdings 8500 S Vinienneces Number Street Chicago Illinois 60620 City State Zip Code How long employed there?	at	ttach a separate page with	0		,			,	
Include part time, seasonal, or self-employer's address Occupation may include student or homemaker, if it applies. Employer's address 701 Lee St STE 500 Number Street 702 Lee St STE 500 Number Street Des Plaines Illinois 60016 City State Zip Code Sunrise Transportation Holdings 8500 S Vinienneces Number Street Des Plaines Illinois 60016 City State Zip Code	Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code How long employed there? Sunrise Transportation Holdings 8500 S Vinienneces Number Street Plaines Illinois 60016 City State Zip Code How long employed there?			Occupation						
or self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code Number Street SB00 S Vinlenneces Number Street	or self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code How long employed there?			Employer's name	Victory Center	of River Oaks		Sunrise Tran	sportation Hold	lings
Self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code City State Zip Code	Self-employed work. Occupation may include student or homemaker, if it applies. Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code City State Zip Code How long employed there?		•	Employer's address	701 Lee St STI	= 500		8500 S Vinienneces		
student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code City State Zip Code City State Zip Code	student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code How long employed there? How long employed there?				Number Street			Number Street		
student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code City State Zip Code City State Zip Code	student or homemaker, if it applies. Des Plaines Illinois 60016 City State Zip Code How long employed there? How long employed there?	0	occupation may include							
City State Zip Code Chicago Illinois 60020 City State Zip Code City State Zip Code	Des Plaines Illinois 60016 Chicago Illinois 60620 City State Zip Code City State Zip Code How long employed there?									
	How long employed there?	or	r homemaker, if it applies.		Des Plaines	Illinois	60016	Chicago	Illinois	60620
How long employed there?					City	State	Zip Code		State	Zip Code
				How long employed there?						
				now long employed tilele:						
and a second results in the second results i				date you file this form. If you h	nave nothing to rep	oort for any line	e, write \$0 in the	space. Include y	our non-filing s	oouse unless you
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you	Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you appeared to the space of the date you file this form.	·				-Ula	f - u th t	. tha linna halaw	. 16	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.	are separated.			re than one employer, combine	tne information for	all employers	tor that person or	1 the lines belov	v. if you need m	ore space, attach
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attact	are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attack	00paidio 0				For	Debtor 1			
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.	are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attack a separate sheet to this form. For Debtor 1 For Debtor 2 or					2.	\$3,416.83		\$2,574.00	
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attact a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse	are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attact a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$3,416.83 \$2,574.00	3. Estima	ate and list monthly overt	ime pav.	;	3.	+ \$0.00		+ \$0.00	

4. Calculate gross income. Add line 2 + line 3.

\$3,416.83

\$2,574.00

Filed 01/229/16 Jeannett Case 16-02718 Entered 01/29/16 11:57:24 Desc Main Doc 1 Documentame Page 36 of 68 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. \$3,416.83 \$2,574.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$461.50 \$333.67 5b. Mandatory contributions for retirement plans 5b. \$101.83 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations \$0.00 \$0.00 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$563.33 \$333.67 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,853.50 \$2,240.33 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation \$0.00 \$0.00 8d. 8e. Social Security \$0.00 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$0.00 \$0.00 Specify: 8f. 8g. Pension or retirement income \$0.00 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$2.853.50 \$2.240.33 \$5.093.83 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Voluntary Household Contributions \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$5,093.83 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No Yes. Explain:

	Case 16-0271	18 Doc 1 Filed 0	1/29/16 Entered	<u> </u>	Desc Mair	1
Fill in this infor	rmation to identify your ca		<u> </u>			
Debtor 1	Jeannett		Grier			
	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filir	ng) First Name	Middle Name	Last Name	An amended fili	ng	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)		showing post-petition the following date:	n chapter 13
Case number (If known)			. ,			
. ,	F 400 l			MM / DD / YYY	Υ	
	Form 106J					
<u>3chedu</u>	le J: Your E	xpenses				12/1
nformation. If if known). Ans	more space is needed, swer every question.	attach another sheet to this f		qually responsible for supplyi ditional pages, write your nam		ber
1. Is this a joi	scribe Your Househ	ioid				
✓ No. G	o to line 2					
Yes. D	Ooes Debtor 2 live in a s	separate household?				
	No					
Ī	Yes. Debtor 2 must fil	le Official Forms 106J-2, Expens	ses for Separate Household c	of Debtor 2.		
2. Do you ha	ve dependents?	No				
-	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	hip to Dependent's age	Does depen- with you?	dent live
			Child		No.	
			Child		✓ Yes. No.	
			Crilia		Yes.	
	xpenses include of people other	No				
than		Yes				
yourself an dependent	nd your \square	ies				
Part 2: Esti	imate Your Ongoing	g Monthly Expenses				
Estimate you	r expenses as of your b	pankruptcy filing date unless y	•	a supplement in a Chapter 13 eck the box at the top of the fo	•	
		cash government assistance it on Schedule I: Your Income			Yo	our expenses
	I or home ownership ex or the ground or lot. 4.	penses for your residence. Inc	clude first mortgage payments	s and	4.	\$750.00
If not inc	luded in line 4:				••	
	estate taxes				4a	\$0.00
4b. Prope	erty, homeowner's, or rente	er's insurance			4b.	\$0.00
	maintenance, repair, and				4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Filed 01629/16 Entered 01/29/16 16:57:24 Desc Main Document Page 38 of 68 Debtor 1 Jeanne Case 16-02718 Doc 1
First Name Middle Name

Document Page 38 of 08		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$450.00
6b. Water, sewer, garbage collection	6b.	\$200.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$300.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$500.00
8. Childcare and children's education costs	8.	\$300.00
9. Clothing, laundry, and dry cleaning	9.	\$200.00
10. Personal care products and services	10.	\$200.00
11. Medical and dental expenses	11.	\$300.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$550.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$300.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$352.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes 20b.	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses 20d.	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

Debtor 1		<u>se 16-02718 </u>	Doc 1	Filed 01¢29/16	<u> Entered</u> 01/20)/h1166 <i>(i</i> 11kn1bi/57: <u>24</u>	<u>Desc Main</u>	
	First Name		Middle Name	Documetht end	Page 39 of 68			
21.Other	. Specify: Fu	rniture			J		21	\$700.00
22. Calcu	ılate your mo	onthly expenses.						\$5,102.00
22a. A	Add lines 4 thr	ough 21.						\$0.00
22b. C	Copy line 22 (r	nonthly expenses for	Debtor 2), if an	y, from Official Form 106J	-2			\$5,102.00
22c. A	dd line 22a ar	nd 22b. The result is y	your monthly ex	penses.		;	22.	
23.Calcu	late your mo	nthly net income.					-	
23a. C	Copy line 12 (y	our combined month	nly income) from	Schedule I.		2	23a	\$5,093.83
23b. C	Copy your mor	thly expenses from lin	ne 22 above.			2	23b <u> </u>	\$5,102.00
23c. S	Subtract your n	nonthly expenses fror	m your monthly	income.				(\$8.17)
-	The result is y	our monthly net inco	me.			2	23c	
24. Do yo	ou expect an	increase or decrea	se in your exp	enses within the year af	er you file this form?			
For e	example, do yo	ou expect to finish pay	ying for your ca	loan within the year or do	you expect your			
morto	gage paymen	t to increase or decre	ease because o	f a modification to the term	s of your mortgage?			
<u> </u>	No							
✓ \	⁄es							
	Expl	ain here:						
		dent loan payments	beginning in Ma	arch				
		1.,						
								_

Official Form 106Dec Declaration About an Individual Debtor's Schedules	Check if this is a amended filing
First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules	
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules	
Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules	
Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules	
Official Form 106Dec Declaration About an Individual Debtor's Schedules	
Official Form 106Dec Declaration About an Individual Debtor's Schedules	
	12/1
If two married people are filing together, both are equally responsible for supplying correct information.	
property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
✓ No	
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	
✗ /s/ Jeannett Grier ✗	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: JG

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main Document Page 42 of 68

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Client

Date: 1/29/2016

Initial: JG

Fill	in this inform	Case 16-02718 nation to identify your case:		Filed 01/29/16	Entered 01	29/16 11:57:24	Desc Main
	otor 1	Jeannett		Grier			
	otor 2	First Name First Name	Middle N				
		ankruptcy Court for the:	Middle N	Name Last Nar District of Illine			
	se number	annuptey Countries and		(Sta			
(If k	nown)						Check if this is a
		Form 107					amended filing
Be a spac	s complete e is needed	and accurate as possib d, attach a separate shee	le. If two married t to this form. On		r, both are equall pages, write you	y responsible for supply	ring correct information. If more er (if known). Answer every question
1.	·	your current marital state		and Where Tou Live	ed Belole		
••	✓ Mar						
2.	During t	he last 3 years, have you	lived anywhere o	ther than where you live	now?		
	✓ No Yes.	List all of the places you liv	red in the last 3 yea	ars. Do not include where yo	ou live now.		
	Deb	tor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as I	Debtor 1	Same as Debtor 1
	Num	nber Street		From	Number Stree	et	From
							To
	City	State	Zip Code	-	City	State Zip C	ode
					Same as I	Debtor 1	Same as Debtor 1
	Num	nber Street		From	Number Stree	et	From
				То			To
	City	State	Zip Code	-	City	State Zip C	ode
3.	territories in	•	Idaho, Louisiana, N	Nevada, New Mexico, Puert			(Community property states and

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/166/16157:24 Desc Main

First Name Middle N	Name Document Document	Page 44 of 68		
rt 2: Explain the Sources of Your In		_		
Did you have any income from employment Fill in the total amount of income you received activities. If you are filing a joint case and you have the No Yes. Fill in the details.	from all jobs and all businesses	, including part-time		,
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$3154.00	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31, 2015) YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$41012.00		
For the calendar year before that: (January 1 to December 31, 2014) YYYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$20000.00	Wages, commissions, bonuses, tips☐ Operating a business	
Did you receive any other income during the Include income regardless of whether that income benefit payments; pensions; rental income; interest and you have income that you received together. List each source and the gross income from each of the income that you received together. No Yes. Fill in the details.	me is taxable. Examples of other rest; dividends; money collected r, list it only once under Debtor 1.	income are alimony; child s from lawsuits; royalties; and	d gambling and lottery winnings.	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31,				

For the calendar year before that: (January 1 to December 31, 2014 Debtor 1 Jeanne Case 16-02718
First Name Filed 01629/16 Entered 01/29/16 (14):57:24 Desc Main Document Page 45 of 68 Doc 1

Pa	rt 3: L	ist Cer	tain Pa	yments Y	ou Made Before	You Filed for Bar	nkruptcy		
6.	Are eit	ther Debt	tor 1's or	Debtor 2's	debts primarily cor	sumer debts?			
	☐ No				tor 2 has primarily o	consumer debts. Cons	sumer debts are defined in 1	1 U.S.C. § 101(8) as "incurr	ed by an individual primarily
		During	g the 90 d	ays before y	ou filed for bankruptcy	, did you pay any credito	or a total of \$6,225* or more?		
		□N	lo. Go to I	line 7.					
		Y	total	amount you	paid that creditor. Do	not include payments for	more in one or more payme or domestic support obligatio attorney for this bankruptcy	ons, such as	
* Subject to adjustment on 4/01/16 and every 3 y						ars after that for cases f	led on or after the date of ac	ljustment.	
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.									
		During	g the 90 d	ays before y	ou filed for bankruptcy	, did you pay any credito	or a total of \$600 or more?		
		√ N	lo. Go to I	line 7.					
			es. List by that	pelow each co	not include payments		ore and the total amount you oligations, such as child sup ankruptcy case.		
						Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	- -	Creditor's Number City	Name Street	State	Zip Code				Mortgage Car Credit card Loan repayment Suppliers or vendors Other
	_						_		- Mortgage
	(Creditor's	Name						Car
	1	Number	Street			•			Credit card
	-								Loan repayment Suppliers or
	(City		State	Zip Code				vendors
									Other
	(Creditor's	Name						─
	<u>-</u>	Number	Street						Credit card
	_								Loan repayment
	-	City.		Chatc	7in C				Suppliers or vendors
	(City		State	Zip Code				Other

<u>Jeanne€a</u>se 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 /14-14-57:24 Desc Main Debtor 1 Document Page 46 of 68 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (16/29/16) Doc Main
First Name Document Page 47 of 68

Mishin A Lafa Cl. I C.				
Within 1 year before you filed for bar List all such matters, including personal disputes.	Ikruptcy, were you a party in any laws injury cases, small claims actions, divorce			stody modifications, and contra
No Yes. Fill in the details.				
	Nature of the case	Court or agency		Status of the case
Case title				Pending
		Court Name		On appeal
Case number		Number Street		Concluded
		City State	Zip Code	-
Case title				Pending
		Court Name		On appeal
Case number		Number Street		Concluded
		City State	Zip Code	_
	Describe the pr	operty	Date	Value of the property
	Describe the pr	operty	Date	
Creditor's Name			Date	
	Describe the pr		Date	
Creditor's Name Number Street	Explain what ha	appened	Date	
	Explain what ha	appened s repossessed.	Date	
Number Street	Explain what ha	appened s repossessed. s foreclosed. s garnished.	Date	
Number Street	Explain what hat Description in the Control of the	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		property
Number Street	Explain what ha	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.	Date	
Number Street City State	Explain what hat Description in the Control of the	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		Property Value of the
Number Street	Zip Code Zip Code Property wa Property wa Property wa Describe the pr	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		Property Value of the
Number Street City State	Explain what hat Description in the Control of the	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		Property Value of the
Number Street City State Creditor's Name	Explain what hat Describe the property wat Explain what hat Describe the property wat Explain what hat Describe the property wat Describe the proper	s repossessed. s foreclosed. s garnished. s attached, seized, or levied.		Property Value of the
Number Street City State Creditor's Name	Explain what hat Describe the property wat Explain what hat Describe the property wat Explain what hat Describe the property wat Describe the proper	appened s repossessed. s foreclosed. s garnished. s attached, seized, or levied. operty appened s repossessed. s foreclosed.		Property Value of the

D00	tor 1		<u>d 01¢29/16 Entered </u> @1/29/16 <i>(</i> 1.1.57: ocument Page 48 of 68	24 Desc	<u>Main</u>
11.	acco	ounts or refuse to make a payment because you owe No	creditor, including a bank or financial institution, set of ed a debt?	f any amounts fr	rom your
		Yes. Fill in the details.	Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street			
		City State Zip Code	Last 4 digits of account number: XXXX-		
12.	rece	iver, a custodian, or another official?	f your property in the possession of an assignee for the	e benefit of credi	itors, a court-appointed
		No Yes			
Part 13.		List Certain Gifts and Contributions	give any gifts with a total value of more than \$600 per p	ooreon?	
10.	***	umi 2 years before you med for bankruptcy, and you	give any girls with a total value of more than \$000 per p	JCI JOII :	
	✓	No Yes Fill in the details for each gift			
		No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you	Describe the gifts	•	Value
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift	Describe the gifts	•	Value

		Document Page 49 of 68		
14. Wi		u give any gifts or contributions with a total value of mor	re than \$600 to ar	ny charity?
-	No			
¥	Yes. Fill in the details for each gift or contribution.			
_	Gifts with a total value of more than \$600	Describe the gifts	Dotos vou	Value
	per person	Describe the gifts	Dates you gave the gifts	value
	P - P		3	
	Charity's Name	_		
	Changs Name			
		_		
	Number Street	_		
	City State Zip Code	_		
	l .			
art 6:	List Certain Losses			
5. Wit	thin 1 year before you filed for hankruntcy or since	you filed for bankruptcy, did you lose anything because	of theft fire other	r disaster or
	mbling?	you med for build uptoy, and you lose unjuming because	or tricit, inc, otric	i disaster, or
\mathbf{Y}	No			
Ш	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property los
	how the loss occurred	Include the amount that insurance has paid. List pending	loss	
		insurance claims on line 33 of Schedule A/B: Property.		
	1			
6. Wit	king bankruptcy or preparing a bankruptcy petitio	or anyone else acting on your behalf pay or transfer any on? edit counseling agencies for services required in your bankrupto		ne you consulted abou
6. Wit	thin 1 year before you filed for bankruptcy, did you king bankruptcy or preparing a bankruptcy petitio	n?		ne you consulted abou
6. Wit	thin 1 year before you filed for bankruptcy, did you king bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre	n?		ne you consulted abou
6. Wit	thin 1 year before you filed for bankruptcy, did you eking bankruptcy or preparing a bankruptcy petitioude any attorneys, bankruptcy petition preparers, or cre	n?	Date payment	ne you consulted abou
6. Wit	thin 1 year before you filed for bankruptcy, did you eking bankruptcy or preparing a bankruptcy petitioude any attorneys, bankruptcy petition preparers, or cre	n? edit counseling agencies for services required in your bankrupto	Date payment or transfer	
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details.	edit counseling agencies for services required in your bankrupto Description and value of any property transferred	Date payment or transfer was made	Amount of payment
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer	
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	edit counseling agencies for services required in your bankrupto Description and value of any property transferred	Date payment or transfer was made	Amount of payment
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	thin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
5. Wit	thin 1 year before you filed for bankruptcy, did you sking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cre No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
5. Wit	chin 1 year before you filed for bankruptcy, did you beking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
5. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cress No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cress No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petition ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petition ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petition ude any attorneys, bankruptcy petition preparers, or creed No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cress No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment
6. Wit	chin 1 year before you filed for bankruptcy, did you cking bankruptcy or preparing a bankruptcy petitio ude any attorneys, bankruptcy petition preparers, or cress No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Chicago Illinois 60606 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street	edit counseling agencies for services required in your bankrupto Description and value of any property transferred Semrad Law Firm	Date payment or transfer was made	Amount of payment

Filed 01629/16 Entered 01/29/116 (1616)57:24 Desc Main

Deb	tor 1	Jeannetase 16-02718 First Name	Doc 1 Filed Middle Name Do	<u>d 01¢29/16</u> cumetht™	Entered 01/29 Page 50 of 68	/16 /141457:	24 Desc	Main	
17.	you	nin 1 year before you filed for bar deal with your creditors or to mal ot include any payment or transfer th	ke payments to you	creditors?	ng on your behalf pay o	r transfer any p	roperty to anyor	ne who p	promised to help
	✓	No Yes. Fill in the details.							
				Description and	l value of any property t	ransferred	Date payment or transfer was made	Amoui	nt of payment
		Person Who Was Paid	 ,						
		Number Street							
		City State	Zip Code						
	Inclu trans	nin 2 years before you filed for banary course of your business or to de both outright transfers and transfers that you have already listed on the No Yes. Fill in the details.	financial affairs? fers made as security					-	
				Description and property transfe			property or paym bts paid in exch		Date transfer was made
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
19.		nin 10 years before you filed for be se are often called asset-protection		ransfer any prop	erty to a self-settled tru	st or similar de	vice of which yo	u are a k	peneficiary?
	V	No							
	Ш	Yes. Fill in the details.		Description and	d value of the property	transferred			Date transfer was made
		Name of trust							
									l .

Jeanne tase 16-02718
First Name Filed 01629/16 Entered 01/29/16 11-57:24 Desc Main Document Page 51 of 68 Doc 1 Debtor 1

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

	thin 1 year before you filed for bankruptcy, were transferred?	any financial accounts or instrum	nents held in your name, or for you	r benefit, closed, sold, moved,
Inc	lude checking, savings, money market, or other finan operatives, associations, and other financial institution		shares in banks, credit unions, brokera	age houses, pension funds,
¥	No			
ᆫ	Yes. Fill in the details.	Land A. Parka of an arrows	T	Data assessment Land Laborator
		Last 4 digits of account number	Type of account or instrument	Date account Last balance was closed, before closing
				sold, moved, or transfer
				or transferred
	Person Who Was Paid	— XXXX-	Checking	
	1 GISOTI VVIIO VVAS I AIU		Savings	
	Number Street		Money market	
			Brokerage	
	City State Zip Code		Other	
		XXXX-	Checking	
	Person Who Was Paid		Savings	
	Number Street		Money market	
			Brokerage	
	City State Zip Code		Other	
[[No Yes. Fill in the details.			
	•	Who else had access to it?	Describe the contents	Do you still have it?
	Name of Financial Institution	Name		No
	Number Street	Number Street		Yes
	City State Zip Code	City State Zi	ip Code	
2. Ha	ve you stored property in a storage unit or place	other than your home within 1 ye	ear before you filed for bankruptcy	<i>(</i>
✓	No			
	Yes. Fill in the details.			
		Who else had access to it?	Describe the contents	Do you still have it?
				nave it:
	Name of Storage Facility	Name		☐ No
				Yes
	Number Street	Number Street		☐ 163
	Number Street	Number Street		

		First Name		Middle Name	Docum	≝nt™ Pa(ge 52 of 68		
Part	9:	dentify Property	You Hol	d or Contro	l for Some	ne Else			
23.	_	ou hold or control a	ny property	y that someone	e else owns? I	nclude any pro	pperty you borro	owed from, are storing for, or hold in tr	ust for someone.
	Ħ	Yes. Fill in the details.							
	_				Where is th	e property?		Describe the contents	Value
		Owner's Name			Number Str	eet		-	
		Number Street			City	State	Zip Code	-	
		City	State	Zip Code	_				
Part	10:	Give Details Abo	out Envir	onmental In	formation				
rait	10.	Olve Details Ab	Out Liivii	Ommema m	TOTTILATION				
For	the p	urpose of Part 10, the f	following de	finitions apply:					
	■ Ei	<i>nvironmental law</i> mear	ns any feder	al, state, or local	statute or requ	lation concernin	g pollution, conta	mination, releases of	
		azardous or toxic subst	•		-		• .		
	in	cluding statutes or reg	ulations con	trolling the clear	nup of these su	bstances, waste	es, or material.		
	■ Si	ite means any location,	, facility, or p	roperty as define	d under any en	vironmental law,	whether you now	own, operate, or utilize it	
	or	used to own, operate	, or utilize it,	including dispos	sal sites.				
	■ H	azardous material mea	ans anything	an environment	al law defines a	s a hazardous w	aste, hazardous	substance,	
	to	xic substance, hazardo	ous material	, pollutant, conta	aminant, or simi	lar term.			
Rep	ort al	I notices, releases, and	d proceeding	s that you know	about, regardle	ess of when they	occurred.		
·		, ,		,	, 0	,			
24.	Has	any governmental u	ınit notified	you that you n	nay be liable o	or potentially lia	able under or in	violation of an environmental law?	
					•				
	씜	No Yes. Fill in the details.							
	Ц	res. Fili in the details.	_		Cavarama	atalmit		Environmental law if you know it	Data of nation
					Governmen	itai unit		Environmental law, if you know it	Date of notice
		Name of site			Government	al unit		-	
		Number Street			Number Str	eet		-	
		City S	State	Zip Code	City	State	Zip Code	-	
25	Нам	e you notified any go	overnments	al unit of any re	lease of haza	rdoue material	2		
25.	пач	e you notined any go	Jvermmema	ii uiiii oi aily le	ilease oi ilazai	ruous materiai	·		
	✓	No							
	Ш	Yes. Fill in the details.							
					Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site			Government	al unit		_	
					Government	ai ul III			
		Number Street			Number Str	eet		_	
		City S	State	Zip Code	City	State	Zip Code	_	

Debtor 1 Jeanne Case 16-02718 Doc 1 Filed 01629/16 Entered 01/29/16 (16.16)57:24 Desc Main

Debto	or 1	Jeannetase 16-02718 First Name	B Doc 1 F	iled 01629/16 Document P	<u>Entered</u> 01 /29 age 53 of 68	h16 (141) 457: <u>24</u>	Desc Main
26.	Hav	e you been a party in any jud	icial or administrati	ve proceeding under an	y environmental law	? Include settlements	and orders.
	✓	No Yes. Fill in the details.					
	_			Court or agency		Nature of the case	Status of the case
		Case title					Pending
		-		Court Name			On appeal
				Number Street			Concluded
		Case number		City State	Zip Code		
Part 1	1:	Give Details About You	r Business or C	Connections to Any	Business		
27.	With	nin 4 years before you filed fo	or bankruptcy, did y	ou own a business or ha	ave any of the followi	ng connections to any	/ business?
		A sole proprietor or self-en		•	•	time	
		A member of a limited liab A partner in a partnership	ility company (LLC) o	or limited liability partnersh	ip (LLP)		
		An officer, director, or man	aging executive of a	corporation			
_		An owner of at least 5% of	the voting or equity :	securities of a corporation			
		No. None of the above applies. Yes. Check all that apply above		below for each business			
	_	Yes. Check all that apply above and fill in the details bel			Describe the nature of the business		entification number Do not al Security number or ITIN.
		Business Name Number Street				EIN:	
				Name of accounta	Name of accountant or bookkeeper		ess existed
		City State	Zip Code		·	From	То
				Describe the natu	re of the business		entification number Do not al Security number or ITIN.
		Business Name Number Street		_		EIN:	
				Name of accounta	int or bookkeeper	Dates busine	ss existed
		City State	Zip Code			From	To
				Describe the natu	Describe the nature of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
		Number Street		Name of accounts	Name of accountant or bookkeeper		ess existed
		City State	Zip Code		o. boomocper	From	То

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No			<u>6-02718</u>		iled 01 <i>\$</i> 29/16	<u>Entered</u> @14294166/142457:	<u>24 </u>
Creditors, or other parties. No		First Name		Middle Name	Documetnit ^{me}	Page 54 of 68	
Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2		•	•	ankruptcy, did y	ou give a financial sta	atement to anyone about your busines	s? Include all financial institutions,
Name MM/DD/YYYY Number Street	✓		ils below.				
Number Street City State Zip Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Jeannett Grier Signature of Debtor 1 Date 1/29/2016 Date 1/29/2016					Date issued		
City State Zip Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2		Name			MM/DD/YYYY		
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2		Number Street					
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2		City	State	Zip Code			
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2	Part 12:	Sign Below					
Date 1/29/2016 Date 1/29/2016	and	correct. I understa	nd that makin				
	banl	· ·		o to \$250,000, or	imprisonment for up	•	
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	bani	x	Jeannett Grier		imprisonment for up	*	
	banl	★ /s/ Signa	Jeannett Grier ture of Debtor		imprisonment for up	Signature of Debtor 2	
✓ No		★ /s/ Signa Date	Jeannett Grier ture of Debtor 1/29/2016		<u> </u>	Signature of Debtor 2 Date 1/29/2016	341, 1519, and 3571.
☐ Yes	Did :	/s/ Signa Date	Jeannett Grier ture of Debtor 1/29/2016		<u> </u>	Signature of Debtor 2 Date 1/29/2016	341, 1519, and 3571.
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Did y	/s/ Signa Date you attach addition	Jeannett Grier ture of Debtor 1/29/2016		<u> </u>	Signature of Debtor 2 Date 1/29/2016	341, 1519, and 3571.
✓ No	Did :	/s/ Signa Date you attach addition No Yes	Jeannett Grier ture of Debtor 1/29/2016 nal pages to Yo	our Statement o	f Financial Affairs for	Signature of Debtor 2 Date 1/29/2016 Individuals Filing for Bankruptcy (Office)	341, 1519, and 3571.
Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	Did y	/s/ Signa Date you attach addition No Yes you pay or agree to	Jeannett Grier ture of Debtor 1/29/2016 nal pages to Yo	our Statement o	f Financial Affairs for	Signature of Debtor 2 Date 1/29/2016 Individuals Filing for Bankruptcy (Official Control of the Control of th	341, 1519, and 3571.

	Case 16-0271	8 Doc 1 Filed (01/20/16	Entared 01	<i>L</i> 29/16 11:57:2	4 Desc Main
Fill in this informa	ation to identify your cas		01179110		12.9/10 11.57.2	+ Desc Main
Debtor 1	Jeannett		Grier			
Debtor 2	First Name	Middle Name	Last Nar	ne		
(Spouse, if filing)	First Name	Middle Name	Last Nar	me		
United States Ba	ankruptcy Court for the:	Northern	District of Illin			
(If known)					•	
Official F	orm 108					Check if this is an amended filing
Stateme	nt of Intenti	on for Individ	uals Filin	g Under	Chapter 7	12/15
■ creditors have least you must file thit whichever is ear of two married per credit of the credit	e claims secured by you sed personal property s form with the court w lier, unless the court e	and the lease has not expir vithin 30 days after you file xtends the time for cause.	red. e your bankruptc You must also se	end copies to th	e creditors and lessor	•
	· ·	ble. If more space is neede	ed. attach a separ	rate sheet to this	s form. On the top of a	ny additional pages.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: Exeter Finance Corp Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Honda, Civic | Value: \$4,975.00 Retain the property and [explain]: Surrender the property. ✓ No. Creditor's name: Progressive Finance Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Used Furniture | Value: \$600.00 Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a Reaffirmation Agreement. property securing debt: Retain the property and [explain]:

Debtor	Case 16-02718	Doc 1	Filed 01/29/16	Entered 01/29/16 11:57:24 Page 56 of 68 Rown)	Desc Main	
1	First Name	Middle Nam	ne Läst Nan	ne known)		
Part 2:	Part 2: List Your Unexpired Personal Property Leases					

or any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the iformation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an nexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).			
Describe your unexpired personal property leases	Will the lease be assumed?		
Lessor's name:	□ No □ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	□ No □ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	☐ No ☐ Yes		
Description of leased property:			
Lessor's name:	□ No □ Yes		
Description of leased property:			
Lessor's name:	□ No □ Yes		
Description of leased property:			
art 3: Sign Below			
Under penalty of perjury, I declare that I have indicated m that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal property		
✗ /s/ Jeannett Grier	_ x		
Signature of Debtor 1	Signature of Debtor 1		
Date 1/29/2016	Date 1/29/2016		

MM/DD/YYYY

MM/DD/YYYY

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main Document Page 57 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

n re	Jeannett Grier ;		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	ON OF ATTORNEY FOR	DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, or in connection w ith the bankruptcy case is as follows:	or agreed to be paid to me, fo		
	For legal services, I have agreed to accept			\$1,465.00
	Prior to the filing of this statement I have received			\$0.00
	Balance Due			\$1,465.00
2	The source of the compensation paid to me was: Debtor	Other (specify)		
3	3. The source of the compensation paid to me is: Debtor	Other (specify)		
4	I have not agreed to share the above-disclose members and associates of my law firm.	ed compensation with any oth	er person unless they are	
	I have agreed to share the above-disclosed comembers or associates of my law firm. A cope the people sharing in the compensation, is at	y of the agreement, together		
5	i. In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation			
	b. Preparation and filing of any petition, sch	edules, statements of affairs	and plan which may be required;	
	c. Representation of the debtor at the meet	ing of creditors and confirmat	ion hearing, and any adjourned hearings th	ereof;
6	6. By agreement with the debtor(s), the above-disclo	sed fee does not include the	following services:	
		CERTIFIC	CATION	
	I certify that the foregoing is a complete statement of ceedings.	f any agreement or arrangem	ent for payment to me for representation of	the debtor(s) in this bankruptcy
	1/29/2016		/s/ Peter O'Connor	
-	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

Case 16-02718 Doc 1 Filed 01/29/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

Entered 01/29/16 11:57:24 Desc Main Page 59 of 68

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main UNITED STATES BANKBURTCY GOURT Northern District of Illinois

In re:	Grier, Jeannett;	Case No.	Case No		
	Debtor(s)	0000110.			
		Chapter.	Chapter7		
	VERIFIC	CATION OF CREDITOR MATRI	ıx		
	The above named Debtors hereby verify the	hat the attached list of creditors is true and	correct to the best of their knowledge		
Date:	1/29/2016	/s/ Grier, Jeannett			
		Grier, Jeannett Signature of Debtor			
		/s/			
		Signature of Joint Deb	tor		

Case 16-		01/29/16 Entered	d 01/29/16 11:57:24 Of 68	Desc Main			
First Name			01 00				
Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.							
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors?	paid that funds will be avant to a Yes.			and administrative expenses are			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,00 10,001-25,0	0	25,001-50,000 50,001-100,000 More than 100,000			
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	PARTITION .		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
^{20.} How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	Sidner .		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below							
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
	Signature of Debtor 1 Executed on	G DD / YYYY	Signature of Debtor Executed on	2 01 /39/3016 MM/DD/YYYY			

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main Fill in this information to identify your case: Debtor 1 Jeannett Grier First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name District of Illinois United States Bankruptcy Court for the: Northern (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ Jeannett Grier Signature of Debtor 1

> 1/29/2016 MM/DD/YYYY

Date

Debtor 1	Case Jeannett First Name	16-02718	Doc 1	Filed 01/29/16 Document	Entered 01/29/16 11:57:2 Page 65 of 68 ^{number (if known)} —	4 Desc Main			
	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
▽	No Yes. Fill in the de	etails below.							
				Date issued					
	Name			MM/DD/YYYY					
	Number Stre	et							
	City	State	Zip Coo	le					
Part 12:	Sign Below								
and	I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
		/s/ Jeannett Grier nature of Debtor 1			Menature of Debtor 2				
	Dat	e 1/29/2016			Date 1/29/2016				
Did y	ou attach additi	onal pages to Yo	our Statemen	t of Financial Affairs for	Individuals Filing for Bankruptcy (Offici	al Form 107)?			
V	☑ No								
	Yes								
Did y	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?								
V	✓ No								
П									

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main Debtor Jeannett Page 66 of Page number (if **Document** 1 First Name Middle Name List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? No Lessor's name: Yes Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Yes Description of leased property: No Lessor's name: Description of leased property: No Lessor's name: Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

🗶 /s/ Jeannett Grier	
Signature of Debtor 1	

x Jeann Sto Store Standard of Debtor 1

Date 1/29/2016 MM/DD/YYYY

Date 1/29/2016 MM/DD/YYYY

Case 16-02718 Doc 1 Filed 01/29/16 Entered 01/29/16 11:57:24 Desc Main

UNITED STATES BANKED PTCY COURT

Northern District of Illinois

In re:	Grier, Jeannett ;	Case No.	Case No				
-	Debtor(s)						
		Chapter. Chapter7					
	VERIFICA	TION OF CREDITOR MATRIX					
The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their							
Date:	1/29/2016	Grier, Jeannett Grier, Jeannett Signature of Debtor					
		/s/					

Signature of Joint Debtor

Debtor 1	Jeanneu	16-02718	Doc 1	Filed 01/29/16	Entero	ed 01/29/16	11:57	:24 Des	с Маі	n
	First Name		Middle Name	DOCUTERS/MR/ITE	r age o	Column A Debtor 1		Column B Debtor 2 or non-filing sp	ouse	
Do no		if you contend tha		eceived was a benefit und	ler the	\$0.00	-	\$0.00		
	al Security Act. Inste	•								
For y	our spouse	Anna and a		\$0.00 \$0.00						
	on or retirement in it under the Social S		nclude any amo	ount received that was a		\$0.00	-	\$0.00	·	
Do no receiv	ot include any benefi ved as a victim of a v estic terrorism. If nec	its received unde war crime, a crim	r the Social Sec e against huma	ecify the source and amo curity Act or payments anity, or international or separate page and put th						
Total :	amounts from separ	ate pages, if any	_			+\$0.00		+\$0.00		
	culate your total cu	-		nes 2 through 10 for eac	:h	\$3,417.67	+	\$2,569.67		= \$5,987.34
COIL	umm. Then add the t	Otal for Column A	to the total for	COMMIT B.						Total current monthly income
Part 2:	Determine Wh	ether the Me	ans Test Ap	oplies to You						monthly lifeonie
12. Calcı	ılate your current	monthly incom	e for the year.	Follow these steps:					г	
12a. C	Copy your total curre	ent monthly incom	ne from line 11.				Copy lin	e 11 here →		\$5,987.34
	Multiply by 12 (the n	umber of months	in a year).						_	X 12
12b. T	he result is your an	nual income for t	his part of the f	orm.					12b.	\$71,848.08
13 Calcu	late the median fa	mily income th	at applies to y	ou. Follow these steps:	mine that the foreign.					
Fill in	the state in which yo	ou live.		Illinois	eriotos minutes (
Fill in	the number of peopl	le in your househ	old.	4	STATE OF THE STATE				_	
	the median family in								13.	\$86,818.00
				nline using the link specif the bankruptcy clerk's o		arate				
14. How	do the lines comp	are?								
14a.	Line 12b is less to Go to Part 3.	than or equal to I	ne 13. On the t	op of page 1, check box	1, There is no	presumption of al	ouse.			
14b. [Line 12b is more Go to Part 3 and			e 1, check box 2, The pre	sumption of a	ouse is determined	by Form	122A-2.		
Part 3:	Sign Below									
By si	gning here, I declare	e under penalty o	f perjury that th	e information on this stat	tement and in	any attachments i	s true and	correct.		
×	/s/ Jeannett Grier				×_l	eann	Ho	Hn		
S	ignature of Debtor	1			Signatu	re of Debtor 2				
C	Date <u>1/29/2016</u> MM/DD/YYY	- Y			Date O	Lammer of Debtor 2	2			
-	ou checked line 14a	a, do NOT fill out								